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CONFIRMATION NO. 9223

|   |   |                                   |   |                                       |
|---|---|-----------------------------------|---|---------------------------------------|
| <b>SERIAL NUMBER</b><br>10/830,081  | <b>FILING OR 371(c) DATE</b><br>04/23/2004<br><b>RULE</b>   | <b>CLASS</b><br>704               | <b>GROUP ART UNIT</b><br>2626   | <b>ATTORNEY DOCKET NO.</b><br>SHALEM1 |
| <b>APPLICANTS</b><br>Ofar Shalem, Bat-Yam, ISRAEL;  |   |                                   |   |                                       |
| ** CONTINUING DATA *****  |   |                                   |   |                                       |
| ** FOREIGN APPLICATIONS *****<br>ISRAEL 160410 02/16/2004   |   |                                   |   |                                       |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **<br>** 06/30/2004   |   |                                   |   |                                       |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged |   | <b>STATE OR COUNTRY</b><br>ISRAEL | <b>SHEETS DRAWING</b><br>4  | <b>TOTAL CLAIMS</b><br>53             |
| Examiner's Signature _____ Initials _____   |   |                                   |   | <b>INDEPENDENT CLAIMS</b><br>5        |
| <b>ADDRESS</b><br>1444  |   |                                   |   |                                       |
| <b>TITLE</b><br>METHOD AND SYSTEM FOR EFFICIENTLY TRANSMITTING ENCODED COMMUNICATION SIGNALS  |   |                                   |   |                                       |
| <b>FILING FEE RECEIVED</b><br>768   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                       |

2/11/97